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Gigi Hoover

(Depositor's name)

Gigi Hoover

(Signature)

July 7, 2004

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/651,669	08/30/2000	Loren L Roy	17761-000950US	2031

TITLE OF INVENTION: STATIC DEVICES AND METHODS TO SHRINK TISSUES FOR INCONTINENCE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	XXXX NO	XXXX \$1,330	\$0	XXXX \$1,330	07/21/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
PEFFLEY, MICHAEL F	3739	607-113000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Solarant Medical, Inc.

Livermore, California

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☐ Publication Fee☒ Advance Order - # of Copies 12

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☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.

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(Authorized Signature)

(Date)

Nena Bains Reg. #47,400

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This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

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07/13/2004 JADD02 00000134 201430 09651669

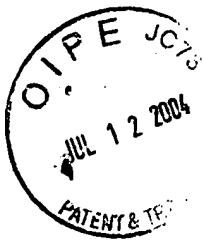
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PATENT

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Attorney Docket No.: 017761-000950US

Mail Stop Issue Fee

Commissioner for Patents,

Washington, D.C. 20231, on July 7, 2004

TOWNSEND and TOWNSEND and CREW LLP

By

Lign Hoover

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

ROY, LOREN L., et al.

Examiner: PEFFLEY, MICHAEL F.

Serial No.: 09/651,669

Art Unit: 3739

Filed: August 30, 2000

NOTIFICATION OF
LOSS OF ENTITLEMENT TO
SMALL ENTITY STATUS

For: STATIC DEVICES AND METHODS
TO SHRINK TISSUES FOR
INCONTINENCE

Mail Stop Issue Fee

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

Pursuant to 37 C.F.R. 1.27(g)(2), notification is hereby given that small entity status is no longer appropriate in connection with the above-identified application.

Respectfully submitted,

Nena Bains

Reg. No. 47,400

TOWNSEND and TOWNSEND and CREW LLP

Two Embarcadero Center, 8th Floor

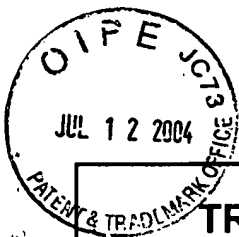
San Francisco, California 94111-3834

(415) 576-0200

Fax (415) 576-0300

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60211667 v1



TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	09/651,669
		Filing Date	August 30, 2000
		First Named Inventor	ROY, LOREN L.
		Art Unit	3739
		Examiner Name	PEFFLEY, MICHAEL F.
Total Number of Pages in This Submission		Attorney Docket Number	017761-000950US

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i> PTOL-85 Issue Fee Transmittal; Notification of Loss of Entitlement to Small Entity Status; Return Postcard
		Remarks The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual	Townsend and Townsend and Crew LLP Nena Bains Reg. No. 47,400	
Signature		
Date	7-7-04	

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Typed or printed name	Gigi Hoover		
Signature		Date	July 7, 2004